STATE OF NEVADA COMMISSION ON MINERAL RESOURCES **DIVISION OF MINERALS**

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MEASUREMENT INSPECTION RECORD - GAS

Date	e: Permit No:
Field	d: API No:
Unit	
Cou	nty/State: Purchaser:
Trav	vel Time: Inspection Time:
GAS	
1.	Disposition of Gas: Sold: Yes No Flared/Vented: Yes No Used on Lease: Yes No
	If yes, describe use:
2.	Sales meter calibration witnessed: : Yes No If yes, attach copy of calibration report and complete only those items in this section not listed in the report.
3.	Meter Mfg: Serial No(s):
4.	Meter Run Size: Orifice Size: Orifice Condition:
5.	Type of taps: Flange Pipe Pipe
	Static Pressure Tap: Upstream: Downstream:
6.	Meter Range: Differential: Static:
7.	Normal frequency of sales meter calibration (per operator):
8.	Specific gravity determined: Yes No
9.	If gas flared/vented or used on lease, method of measurement: Meter Pitot Tube
	Orifice Well Tester Critical Flow Prover Other
10.	Method of estimating acceptable:
	Results:
11.	Remarks: